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| APPLICATION NUMBER | FILING OR 371(C) DATE | FIRST NAMED APPLICANT | ATTY. DOCKET NO./TITLE |
|--------------------|-----------------------|-----------------------|------------------------|
| 10/770,273 | 02/02/2004 | Michael L. Olson | 13914.849.1 |

CONFIRMATION NO. 9600

POA ACCEPTANCE LETTER



Date Mailed: 10/22/2010

98114
Icon Health & Fitness, INC.
1500 South 1000 West
Logan, UT 84321

NOTICE OF ACCEPTANCE OF POWER OF ATTORNEY

This is in response to the Power of Attorney filed 10/14/2010.

The Power of Attorney in this application is accepted. Correspondence in this application will be mailed to the above address as provided by 37 CFR 1.33.

/mnguyen/

Office of Data Management, Application Assistance Unit (571) 272-4000, or (571) 272-4200, or 1-888-786-0101